Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I									YTITY		OTHER	THAN
(Column 1) (Column 2)								TYPE [OR	SMALL	
TOTAL CLAIMS			76		****		1	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ſ	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			W minus 20=				ĺ	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			る minus 3 =		*		ı	X40=	,	OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							ŀ	+135=		1	.070	
* If the difference in column 1 is less than zero, enter "0" in column 2							ł		-30 t T	OR	+270=	-
CLAIMS AS AMENDED - PART II								TOTAL	タケ	OR	TOTAL	THAN
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL E	
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT	2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	·· 2	0	=	ı	X\$ 9=	/	OR	X\$18=	
	Independent	TATION OF ME	Minus	*** O	F CL AIM	= \		X40=		OR	X80=	
	THOTTHESE	NIATION OF WI	DETIT CE DET	CIVIDEIN	CLAIIVI			+135=		OR	+270=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B	B	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	· · ·	\mathcal{O}	=		X\$ 9=		QR	X\$18=	
	Independent	TATION OF MU	Minus	***	CLAIM	=		X40=		OR	X80=	
<u> </u>	THIOT, THESE	TO THE STATE OF THE	Jenn de Der	LINDLINI	CLAIN		' '	+135=		OR	+270=	
							L ∆	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	25.
		(Column 1)		(Colur	mn 2)	(Column 3)					ADDIT. FEC	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	= '		X\$ 9=		OR	X\$18=	
	Independent	.	Minus	***		=	╽┟	X40=			X80=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		 -			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	nber Previously Pa	d For" (Total o	Independ	ent) is the	highest numbe	r foui	nd in the app	ropriate box	in col	umn 1	i